

Fax 888-461-2608  
Call 870-672-1452  
app@501homes.com

**Parham Realty LLC Rental Management**  
Please print clearly. All Questions must be answered to be considered  
Use N/A if not applicable. **Picture I.D. is required before filling out Application.**

Samuel Parham  
Parham Realty LLC P.R. LLC  
1450Plafcan Rd.  
Carlisle, Ar. 72024

APPLICANT #1	APPLICANT #2
Full Name _____	Full Name _____
Previous, alias or Maiden Names: _____	Previous, alias or Maiden Names: _____
BIRTHDAY ___/___/___ Soc.Sec.# _____	BIRTHDAY ___/___/___ Soc.Sec.# _____
Drivers License # and State: _____	Drivers License # and State: _____

**PLEASE PRINT:**

Occupant #3 _____	SSN# _____	B-day ___/___/___	Relationship _____
Occupant #4 _____	SSN# _____	B-day ___/___/___	Relationship _____
Occupant #5 _____	SSN# _____	B-day ___/___/___	Relationship _____

**PLEASE GIVE YOUR RENTAL HISTORY FOR PAST 3 YEARS**

PRESENT ADDRESS: _____	CITY: _____	STATE: _____	ZIP: _____	
HOME PHONE # _____	RENT:\$ _____	DEP. _____	SIZE: _____	MANAGER: _____
LANDLORD PHONE # _____	House or Apt.(circle one)	FROM: ___/___/___	TO: ___/___/___	
Lease expired: ___/___/___	Proper notice given? Y N (circle one)	When given? ___/___/___		
Reason for moving? _____	Is your present address owned, managed by or rented from a family member? Y N			

PREVIOUS ADDRESS: _____	CITY: _____	STATE: _____	ZIP: _____
RENT:\$ _____	DEP.\$ _____	REFUNDED? _____	MANAGER: _____
PHONE # TO VERIFY: _____	House or Apt. (circle one)	FROM: ___/___/___	TO: ___/___/___
Lease expired: ___/___/___	Proper notice given: Y N (circle one)	When given? ___/___/___	
Reason for moving? _____	Was your previous address owned, managed by or rented from a family member? Y N		

**CREDIT INFORMATION**

BANK NAME: _____	CITY: _____	STATE: _____	Phone Number: _____
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**EMPLOYMENT (If Military, please give rank and Unit I.D. #**

APPLICANT #1	APPLICANT #2
Employed By: _____	Employed By: _____
Address/Military Unit: _____	Address/Military Unit: _____
Occupation/Military Rank: _____	Occupation/Military Rank: _____
Date Employed: ___/___/___ Phone: _____	Date Employed: ___/___/___ Phone: _____
Gross Mo.Income:\$ _____	Gross Mo.Income \$ _____
Working Hours: _____ A.M./P.M. to _____ AM/PM	Working Hours: _____ AM/PM to _____ AM/PM
Supervisor: _____ Phone: _____	Supervisor: _____ Phone: _____
Additional Income:\$ _____ Source: _____	Additional Income:\$ _____ Source: _____
<b>PREVIOUS EMPLOYER:</b> _____ FROM: ___/___/___ TO: ___/___/___ Occupation/Military Rank: _____ Supervisor: _____ Phone: _____	<b>PREVIOUS EMPLOYER:</b> _____ FROM: ___/___/___ TO: ___/___/___ Occupation/Military Rank: _____ Supervisor: _____ Phone: _____



**MOTOR VEHICLE REGISTRATION**

	Make	Model	Color	Year	Plate #	State
Vehicle #1						
Vehicle #2						

**PERSONAL REFERENCES AND EMERGENCY CONTACT**

Please give the name of two persons ( not related to you ) will serve as a personal reference

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

In case of emergency, please list 2 persons to contact

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**GENERAL INFORMATION:**

Have you ever been evicted? Y N For what reason? \_\_\_\_\_

Surrender Dep. Y N How Much? \_\_\_\_\_

Refused to pay rent when due? Y N For what reason? \_\_\_\_\_

Had to pay late fees Y N Been late with rent or other debts? Y N

Received a demand for payment notice? ( eviction notice ) Y N

Been asked to vacate by the Management? Y N Broken a rental agreement? Y N

Had complaints made about you or your guests being a problem to neighbors? Y N

Do you have a waterbed? Y N It is required that you get waterbed insurance to live on property.

Are you familiar with Renters Insurance? Yes No Ask Manager for info.if answer is no

**THIS APPLICATION WILL NOT BE CONSIDERED UNLESS FILLED OUT COMPLETELY**

I UNDERSTAND I ACQUIRE NO RIGHTS IN AN APARTMENT UNTIL I SIGN A RENTAL AGREEMENT IN THE FORM SUBMITTED TO ME AND MAKE A DEPOSIT OF \$ \_\_\_\_\_ ON THE APT. I HAVE SELECTED. IN CONSIDERATION FOR MANAGEMENT HOLDING SAID APARTMENT AT \_\_\_\_\_ I HEREBY WAIVE ALL RIGHTS TO THE RETURN OF SAID HOLDING FEE AND DEPOSITS SHALL BE RETAINED AS LIQUIDATED DAMAGES IN THE EVENT I DO NOT ENTER INTO THE AGREEMENT APPLIED FOR HEREIN. IN EVENT SAID APPLICATION FOR TENANCY IS NOT ACCEPTED BY MANAGEMENT, THE HOLDING FEE SHALL BE RETURNED TO THE APPLICANT. APPLICANT HAS **48 HOURS** TO CHANGE HIS/HER DECISION TO MOVE IN AND CONTACT MANAGEMENT TO PICK UP DEPOSIT.

**NON-REFUNDABLE APPLICATION FEE \$ 25.00 per person** (money order only)

IN COMPLIANCE WITH THE FAIR CREDIT REPORT ACT, THIS IS TO INFORM YOU THAT A CREDIT INVESTIGATION INVOLVING THE STATEMENTS YOU MADE ON YOUR RENTAL APPLICATION FOR TENANCY AT THE ABOVE MENTIONED APARTMENT PROPERTY WILL BE MADE. ALL OR PART OF THE ABOVE INFORMATION MAY BE MADE AVAILABLE TO ALL OTHER SERVICES. THIS ALSO INCLUDES RUNNING A CRIMINAL BACKGROUND CHECK OF ALL APPLICANTS. Also a Credit Report Pulled.

I/WE CERTIFY THAT TO THE BEST OF MY/OUR KNOWLEDGE ALL STATEMENTS ARE TRUE AND COMPLETE. I/WE FURTHER AUTHORIZE P.R. LLC TO OBTAIN CREDIT REPORTS CHARACTER REPORTS AND VERIFY RENTAL HISTORY AS NECESSARY TO ALL THE INFORMATION PUT FORTH IN THE ABOVE REFERENCE APPLICATION FOR TENANCY. FALSE, FRAUDULENT OR MISLEADING INFORMATION MAY BE GROUNDS FOR DENIAL OF TENANCY, OR SUBSEQUENT EVICTION.

APPLICANT #1 SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT #2 SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Referred By: \_\_\_\_\_ Date: \_\_\_\_\_

Full Street Address of unit applying for: \_\_\_\_\_

Move In Date: \_\_\_\_\_ Rental Amount: \$ \_\_\_\_\_ Deposit: \$ \_\_\_\_\_ I.D copied \_\_\_\_\_